

Civilian Review and
Complaints Commission
for the RCMP



Commission civile d'examen
et de traitement des plaintes
relatives à la GRC

Ka miskimoot Ewetuk – FORMAL COMPLAINT

We`thoo win / NAME:

CPC piski chi othas chi ki win ake ta son / CPC FILE NO.:

CPC pi toos ochi mitamakiwi aki tas son / CPC CROSS REF. NO.:

Ka ki mi ski mot eta kimit pesim / COMPLAINT DATE: Ke si kaw / DAY Pesim / MONTH Aski / YEAR	O` utmi chi kew osi tawow utami thi chi kew osi tani won / COMPLAINT MADE: <input type="checkbox"/> Ni ta ochi Ayami too pew a pis Kok / BY TELEPHONE <input type="checkbox"/> Anita ochi misin matoowin / BY LETTER OR FAX <input type="checkbox"/> Anita Ochi Pithiswiskootew Musinamatowin / BY EMAIL <input type="checkbox"/> Esi Neheta we yan / IN PERSON	Anisko otus sin ni win ne ki astan a wun anita ochi / ATTACHMENTS ARE IDENTIFIED AS FOLLOWS:
Ka ki ositachik aniki kaki miskimot ka othasinahak / PREPARED BY COMPLAINTS ANALYST:	Eta kimit Ki ki mithi chik RCMP / DATE COMPLAINT FORWARDED TO RCMP: Ke si kaw / DAY Pesim / MONTH Aski / YEAR	
Putusk Anihi Wun to ta mo win na Ekwa Oho / THE SPECIFIC ALLEGATIONS OF MISCONDUCT ARE AS FOLLOWS:		
Anis Koowi We ta ma ke win / ADDITIONAL INFORMATION:		

Uta mi thi chi kew musinahanas – COMPLAINT FORM

Pi ski che Othas chi kiwin Uki tas son / File No. :

Ota' tamithicikew we'tamakiwin / COMPLAINANT INFORMATION

1. Ka Ese Min ni sit We tho win / FAMILY NAME: Ka Mithchi ka we an We tho win mina Chi ki kun / GIVEN NAME AND INITIAL:	2. Ita Ki Ni ta we ki in / DATE OF BIRTH: Ke si kaw/ DAY Pesim / MONTH Aski / YEAR E too we kun <input type="checkbox"/> Na pa uyu / Napew <input type="checkbox"/> Noo sa-uyu / Iskwew GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
3. Ita Ka Ese Pi to ki pa yi musin ma too win / MAILING ADDRESS: E ta- Ka Ese Tusk si ke an tus kooch ki wuska ekun / PHYSICAL ADDRESS IF DIFFERENT FROM MAILING ADDRESS:	4. Ki tit a win ihk Aya mi to wen napisk / HOME TEL.: Ka ese Atos ki an Aya mi to wen napisk / BUSINESS TEL.: Ka pa pa mo tu tan ni w uk Aya mi to wen napisk / CELL: E ya wish min na ma too win / FAX: Pi tis wis koo tew mus in na ma toowin / E-MAIL: E Ta Kita Ki chi tin ka we yan Achimowin ochi / CONTACT FOR MESSAGES: We tho win / NAME: Aye mitoo win Pew a pisk Akitas soon / TEL. NUMBER:
5. Keta A put tuk Ese kis kew win Nusk koo ta mo win / PREFERRED LANGUAGE OF CORRESPONDENCE	<input type="checkbox"/> Akathasemowin / ENGLISH <input type="checkbox"/> Pa` kwa yes se mo win / FRENCH
6. Kitha Che Ana Innew Ka As che pit tit Oma Ke kwan Ka es pa ek Ka a thi moo chi ka tek / WERE YOU THE PERSON INVOLVED IN THE INCIDENT BEING COMPLAINED OF?? Kispin Num Mutha Tansi Esi ika soot Mina Awin ki Ka chi tin int we tam kiwin Anoch Aw ina Kas sichip tet / IF NOT, WHAT IS THE NAME AND CONTACT INFORMATION OF THE PERSON INVOLVED?	<input type="checkbox"/> He He / YES <input type="checkbox"/> Numwa`ch / NO
7. Kisaspin Kita Ki ke methe Kawin piski chi othaschikiwin akitas soon Asichi RCMP Withawow ka itih chik / IF YOU WERE GIVEN A FILE NUMBER BY THE RCMP WITH RESPECT TO THE INCIDENT BEING COMPLAINED OF, PLEASE PROVIDE IT	RCMP Piski chi Otas chiki win Aketus soon / RCMP FILE NO.:
8. Na wan Na Kooch misinaen anima ka wichi ka teek asichi RCMP anima ochi ka espa ek aniki RCMP we tha wow ka si chi pitichik oma is pathik / DID YOU SIGN A COMPLAINT WITH THE RCMP ABOUT THE CONDUCT OF THE RCMP MEMBERS INVOLVED IN THIS INCIDENT? Kiss as pin He he, Tansispi Mina Tan tee Kita Ka ki Ma sin nu ha mun Anima Ka ki Wichi ka tik / IF YES, WHEN AND WHERE DID YOU SIGN THE COMPLAINT?	<input type="checkbox"/> He He / YES <input type="checkbox"/> Numwa`ch / NO
9. Kita Kawateen che awa ka e uso wet mna RCMP kita ayumeitochik moo see Asichi Opi kis kwes tamakew Apo Unu Otetwestamakewo Espi Wetha Ketha Tip awe? Kesaspin Ekosi, ka ah Ochestumawamta mis sin we yi towin, eta ka ese tus si keet mina ayimitowi pepwapisk aki tus soo win ana kitha kawichi isk / DO YOU WISH THE COMMISSION AND THE RCMP TO COMMUNICATE DIRECTLY WITH A LEGAL REPRESENTATIVE OR AN ADVOCATE INSTEAD OF YOURSELF? IF SO, PLEASE PROVIDE THE FULL NAME, ADDRESS AND TELEPHONE NUMBER OF YOUR LEGAL REPRESENTATIVE OR ADVOCATE / Eta ka ese poto ki pak masinekewin / MAILING ADDRESS Kus esatoskian ayamitowin masinekewin / BUSINESS TEL. E ya wish min na ma too win / FAX	
PLEASE NOTIFY THE COMMISSION IF ANY OF YOUR CONTACT INFORMATION CHANGES PRIOR TO THE DISPOSITION OF YOUR COMPLAINT / PLEASE NOTIFY THE COMMISSION IF ANY OF YOUR CONTACT INFORMATION CHANGES PRIOR TO THE DISPOSITION OF YOUR COMPLAINT	

**Naetawe pahikoowin na oma ochi utaminiwa win / CIRCUMSTANCES OF COMPLAINT
(Ke si taw eko ethi ko e kuski ta an tae se no pu yik / COMPLETE AS MUCH AS POSSIBLE)**

10. E ta kimit pesim om ka espathik / DATE OF INCIDENT: Ke si kaw/ DAY Pesim / MONTH Aski / YEAR	11. Es pu yik tip epesimwan oma ku espathik / TIME OF INCIDENT:	12. O teenow mina pikichi uski pis sahki Anima E'ta Ka ki Espayik / CITY AND PROVINCE/TERRITORY OF INCIDENT:
13. We ta Kispin kekwan Weko ko win / DESCRIBE ANY INJURIES SUFFERED		
14. Kiss a pin chekask tesimowa otin neka te waw oma oci osikohowin, awin na ka ki otin nuk oho che kas tesimowina / IF PHOTOS WERE TAKEN OF ANY INJURIES, WHO TOOK THE PHOTOS?		
15. Kespin chi nuntoo na ta we he win ani ochi we sa ki too ta too win na ke ka we ta owe yowin muske we anehe mine eka tus nota we hit akosikamik / IF THERE WAS MEDICAL TREATMENT FOR ANY INJURIES, PLEASE PROVIDE THE NAME OF THE DOCTOR AND MEDICAL FACILITY		
16. We ta musinaha kiawinihk piko kekan kita nokuk kachinahowin kita weche ko yun anima ka esi misekimoyan / DESCRIBE ANY EVIDENCE TO SUPPORT YOUR COMPLAINT		

Ma me to achimowin anima ka ese uta mi ne takwak / DETAILS OF COMPLAINT

17. Ka Ya We ta musin na kiwinihk oma ka espathik mitoni me see we ese Kaskit a yin / PLEASE DESCRIBE THE INCIDENT AS COMPLETELY AS POSSIBLE (CONTINUE ON ADDITIONAL PAGES, IF NECESSARY)	
18. Ke kwan kitha a ka wa ta man kita kusk kit a an sa pos ka an omooche kawechi ta tek utamini me we win? / WHAT WOULD YOU LIKE TO ACHIEVE THROUGH THIS COMPLAINT PROCESS?	
19. O ma uta mine tamooowin E ko oma ka ke ese puminika tek anoochi RCMP / THE COMPLAINT IS ABOUT THE CONDUCT OF THE FOLLOWING RCMP MEMBER(S) (CONTINUE ON ADDITIONAL PAGES, IF NECESSARY)	
We tho win akwa ese ke pawen atoskewin / NAME AND RANK:	Oma Uta mine tamooowin Eko oma Ka ke Ese Puminikatak Anoochi RCMP / DETACHMENT:
We tho win akwa ese ke pawen atoskewin / NAME AND RANK:	Oma Uta mine tamooowin Eko oma Ka ke Ese Puminikatak Anoochi RCMP / DETACHMENT:
We tho win akwa ese ke pawen atoskewin / NAME AND RANK:	Oma Uta mine tamooowin Eko oma Ka ke Ese Puminikatak Anoochi RCMP / DETACHMENT:
20. Aniki Ka ki Wapa takik Ewaki Mina Asichi Kotakiyk RCMP Eka a ochi mo yan / WITNESS(ES) (MAY INCLUDE RCMP MEMBERS YOU ARE NOT COMPLAINING ABOUT) (CONTINUE ON ADDITIONAL PAGES, IF NECESSARY)	
Ka Ese Min ni sit We tho win / FAMILY NAME:	Eta ka Ese Tus sike an / ADDRESS:
Ka Mithchi ka we an We tho win mina Chi ki kun / GIVEN NAME AND INITIAL:	Ayi mi too wipewapisk / TELEPHONE:
RELATIONSHIP TO COMPLAINANT / RELATIONSHIP TO COMPLAINANT:	
Ka Ese Min ni sit We tho win / FAMILY NAME:	Eta ka Ese Tus sike an / ADDRESS:
Ka Mithchi ka we an We tho win mina Chi ki kun / GIVEN NAME AND INITIAL:	Ayi mi too wipewapisk / TELEPHONE:
Ka Eta koo mut Ana Ka Ata methi tak koo sit / RELATIONSHIP TO COMPLAINANT:	
Kistamohewin: animapukitinaman musina ke winihk anima eweta mun eka minwetamun munsinakun kita anima kimekin kuskihe we sewom p,a we tamukiwin om ochi ma mo we kis kaye takwuk ka ese utamewa win. Otiskow RCMP kita ma was kun na mun kitha ese payuk koun kiskayetamowin oma kiska ye ta mo he we win Ewako oma wa was a konika tew Pin ni we Ya wa koo ochi anito ochi nutowa' eyetumowina ese ka ko to mukak piskiche etis'na kewin VII anita ochi RCMP Totumowin oma uta methi ta' kos siwin musina' hekun asichi kakithiow ko'taka otinuma'soo ota'sin na he ke win na ku nista teki kita ke mita wuk RCMP animooche ka na na kachi ta chik pimitisuhum anehe ka tus tik otasooewin anita ka piskiche musin ka tek 45.35 (3) anima RCMP Asichikiwinihk. Ka esenuhepayik, anima RCMP misikimowin animat onanakachitow apo kita wi kachi tin ihk kita pakitina mina pe kiskewin. Omawetumowo kiskayetam mohaowin ese michimin ka tew ese paykut kiska yetam oma wewin pikichi CRCC PPU 005 Kitha maka kitayan tawow kita ki kachitin na mun oma kiska yetum mo he we win anita kitussek kichi othaschikiwin piskichi ese chikewin.	
Note: By submitting the Complaint Form, you are authorizing the Commission for Public Complaints Against the RCMP to collect your personal information. This information is being collected solely for purposes related to Part VII of the RCMP Act. The Complaint Form along with all other relevant documentation may be forwarded to the RCMP for investigation pursuant to subsection 45.35(3) of the RCMP Act. Accordingly, an RCMP complaint investigator may contact you to provide a statement.	
The information is held in Personal Information Bank CRCC PPU 005 and you have a right to access this information in accordance with the Privacy Act.	
Utameyetakewin Musinahikan Uta meya ta ko siwin musinahikun ki osi taw awa / COMPLAINT FORM COMPLETED BY:	